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FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	age burden
hours per respon	16.00

SEC USE ONLY			
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DATE RECEIVED			
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UNITORM ENVILLED OFFERING EXEM	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	THE THE PARTY OF T
Sale of Convertible Promissory Notes and Warrants to Purchase Common Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	O ULOE JUN 1 1 2003
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	101/89
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Modular Genetics, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
65 Cummings Park, Woburn, MA 01801	(781) 271-9819
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Genetic research and product development	PROCESSE
Type of Business Organization corporation	please specify): JUN 122003
Month Year	imated FINANCIAL
CN for Canada; FN for other foreign jurisdiction)	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: 2. Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Jarrell, Kevin Ph.D. Full Name (Last name first, if individual) 65 Cummings Park Woburn, MA 01801 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Smith, Temple, Ph.D. Full Name (Last name first, if individual) 65 Cummings Park Woburn, MA 01801 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Rogers, William Full Name (Last name first, if individual) Choate, Hall & Stewart Exchange Place 53 State Street Boton, MA 02109 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ⊠ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Haberkorn, A.R. Full Name (Last name first, if individual) H.L.M. Management Co. 222 Berkeley Street Boston, MA 02116 Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director Managing Partner Harvard University Full Name (Last name first, if individual) Office of Technology and Trademark Licensing 1350 Massachusetts Avenue Holyoke 727 Cambridge, MA 02138 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter General and/or Beneficial Owner Executive Officer ☐ Director Managing Partner Boston University Full Name (Last name first, if individual) Community Technology Fund 108 Bay State Road Boston, MA 02115

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Executive Officer

Director

General and/or

Managing Partner

Beneficial Owner

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Promoter

Check Box(es) that Apply:

Full Name (Last name first, if individual)

	B. INFORMATION ABOUT OFFERING					
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No XX			
2.						
		Yes	No			
3.	Does the offering permit joint ownership of a single unit?	X				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.						
Co	Full Name (Last name first, if individual) Connecticut Capital Markets, LLC					
Tν	Business or Residence Address (Number and Street, City, State, Zip Code) Two Sound View Drive Suite 100 Fairfield, CT 06830					
Nat R1	Name of Associated Broker or Dealer Richard Klass, Lorenzo DeLuca, Lawrence Kundstet, Peter Lundstet, Michael Flinn					
Sta	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	(Check "All States" or check individual States)		1 States			
	AL AK XZ AR CX XO CXT DE DC RL GA XL IN IA XS KY LA ME MD MA MI MN MT NE NV NH NJ NM NX NC ND OH OX RI SC SD TN TX UT VT VA WA WV WI	MS OR WY	ID MO PM PR			
	Il Name (Last name first, if individual)					
	.P. Turner & Co., LLC siness or Residence Address (Number and Street, City, State, Zip Code)					
	340 Peachtree Road NE 23rd Floor Atlanta, GA 30326					
	Name of Associated Broker or Dealer Peter Lundstet					
Sta	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	(Check "All States" or check individual States)	☐ Al	l States			
	AL AK AZ AR CX CXO CT DE DC XL GA IL IN IA KS KY LA ME MD MA MI MN MT NE XV NH NJ NM XY NC ND OH OX RI SC SD TN TX UT VT VA WA WV WI	MS OR WY	MXQ XXA PR			
Ful	ll Name (Last name first, if individual)					
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)					
Nai	me of Associated Broker or Dealer					
Sta	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
	(Check "All States" or check individual States)	☐ AI	l States			
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	MS OR WY	MO PA PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	Amanum Alarada
	Type of Security	Aggregate Offering Price 0.00	Amount Already Sold 0.00
	Debt		\$
	Equity	477,283	<u>\$ 477,283</u>
	Convertible Securities (including warrants)	1,475,000	s 1,475,000
	Partnership Interests		\$
	Other (Specify		\$
	TotalS	1,952,283	_{\$} 1,952,283
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors 25	of Purchases
	Accredited Investors		\$_1,952,283
	Non-accredited Investors		§ 0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	0	\$ <u>0.00</u>
	Regulation A	0	§ 0.00
	Rule 504	0	<u>\$ 0.00</u>
	Total	0	s_0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		N/A
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		s 3,300
	Legal Fees		\$ 57,000
	Accounting Fees	_	\$ N/A
	Engineering Fees	=	\$ N/A
	Sales Commissions (specify finders' fees separately)		s 285,000
	Other Expenses (identify) Travel		\$ 6,021
	Total		\$ 351,321

ar pr 5. Ince ea ch pr Sa	Id total expenses furnished in response to Part C— oceeds to the issuer." dicate below the amount of the adjusted gross proch of the purposes shown. If the amount for an eck the box to the left of the estimate. The total occeeds to the issuer set forth in response to Particle and the set in the interval of the estimate.	·	r	§ 1,600,962 Payments to
ea ch pro	ch of the purposes shown. If the amount for an eck the box to the left of the estimate. The total of occeeds to the issuer set forth in response to Parallaries and fees	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross t C—Question 4.b above.	Payments to Officers, Directors, &	Payments to
Pι			Officers, Directors, &	Payments to
Pι			Allmaios	Others
				 \$
	irchase of real estate		\$	\$
Pι	irchase, rental or leasing and installation of mad	chinery	_	_
		cilities		S
of	equisition of other businesses (including the val fering that may be used in exchange for the ass		Пs	
	ther (specify):			
_				
_			S	\$
C				
To	otal Payments Listed (column totals added)		[[s_1	<u>,600,9</u> 62
		D. FEDERAL SIGNATURE		
signatı	are constitutes an undertaking by the issuer to fur	e undersigned duly authorized person. If this notice rnish to the U.S. Securities and Exchange Commi redited investor pursuant to paragraph (b)(2) of	ssion, upon writter	
Issuer	(Print or Type)	Signature)	Date	···
Modu	llar Genetics, Inc.	Well-1. 15	June 9 , 2	2003
Vame Will	of Signer (Print or Type) iam C. Rogers	Title of Signer (Print or Type) Secretary		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)